FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Sheri L. Stovall  Name (2) 6942 Liberty Street  Address (number and street)  Navarre, FL 32566  City, State, Zip Code	OFFICE USE ONLY SUPERVISOR OF ELECTIONS 6495 CAROLINE ST., STE. F MILTON, FL 32570-4592 2012 SEP 17 PM 3 03						
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):  ☐ Candidate (office sought): Holley-Navarre Fire District, Seat 2 ☐ Political Committee ☐ CHECK IF PC HAS DISBANDED ☐ Committee of Continuous Existence ☐ CHECK IF CCE HAS DISBANDED ☐ Party Executive Committee ☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED							
(5) REPORT	DENTIFIERS						
Cover Period: From08	09 / 14 / 12 Report Type						
☑ Original ☐ Amendment ☐ Special Election	Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$	Monetary Expenditures \$ 600.89						
Loans \$ 500.00	Transfers to Office Account \$ 0.00						
Total Monetary \$ 600.00	Total Monetary \$ 600.89						
In-Kind \$ 0.00							
	(8) Other Distributions  \$ 0.00						
(9) TOTAL Monetary Contributions To Date \$ 730.00	(10) TOTAL Monetary Expenditures To Date \$697.32						
(11) CERT							
It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true,	on to falsify a public record (ss. 839.13, F.S.)  I certify that I have examined this report and it is true,						
correct, and complete.							
(Type name) Sheri L. Stovall	(Type name) Sheri L. Stovall						
Individual (only for electioneering commun.)  Signature  Deputy Treasurer  Deputy Treasurer  Signature  Chairperson (only for PC, PTY & electioneering commun. organization)							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Sheri L. S	toval	<u> </u>	(2)	I.D. Number		
(3) Cover Period	08 / 10 / 12	througl	h <sup>09</sup> /	14 / 12	(4)_ Page	1 c	of 1
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)	l I					
Sequence	Street Address &	Cor	ntributor	Contribution	In-kind		
<u>Number</u>	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
08 / 27 /12	Sheri Stovall 6942 Liberty St. Navarre, FL 32566			LOA			\$500.00
1							
09 , 05 ,12	Amber J. Schnurer 2486 Raider Ln. Navarre, FL 32566	I	Bus. Dev. Asst.	CHE			\$50.00
2							
09 / 05 12	Harry Bubanas 1187 Bobcat Way Salinas, CA 93905	I	Retired	CHE	-		\$50.00
3							
1 1							
1 1							
1 1							
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1 1							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name		S	Sheri I	L. Stova	<u> </u>			(2) I.D. Num	ıber			
(3) Cover Period	80	/ 10	/ 12	_ through	09	14 /	12	(4) Page	1	of	1	

				,	
(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
08 /29 /12	Sign Masters of NW FL 89B Beal Pkwy FWB FL 32548	Signs	DIS		\$490.89
09 /12 /12	Sheri Stovall 6942 Liberty Street Navarre, FL 32566	Partial refund	REF		\$100.00
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